

CCR QUADRENNIAL REVIEW OF STAFF SCIENTISTS
Quadrennial Review Report

To be sent directly to the employee

A. EMPLOYEE'S NAME:		
B. ORGANIZATIONAL LOCATION:		
C. RANK (circle one)		
1 = Outstanding (Top 10%)		
2 = Excellent (Top 25%), Section D optional		
3 = Good (Top 50%), Section D required		
4 = Satisfactory (Lower 50%), Section D required		
5 = Unsatisfactory (must fill out section D)		
D. Needs Improvement in: (Except for a ranking of outstanding – indicate as many as apply)	√	
		Patient care
		Clinical translational research
		Teaching/mentoring
		Other
Comments:		